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## FAX COVER SHEET

TO: <b>ISSUE FEE PAYMENT</b> U.S. P.T.O.	From: <b>Christopher Novak</b> Intellectual Property Counsel
Tel. N/A	Tele: 408-360-1576
Fax. <b>571-273-2885</b>	Date: March <del>29</del> 2006
Sheets: Cover + <u>5</u>	
RE: <u>Issue Fee Payment: App. S/N 10/805,718 Filed 03/22/2004</u> <u>First Named Inventor: Gaolong Jin, Attorney Docket # IDT-1766,</u> <u>IDT File # 1766</u>	

*Message:*

Please find attached:

1. Part B-Issue Fee Transmittal + Duplicate
2. Change of Correspondence
3. "Fee Address" Indication Form
4. Transmittal Form

Thank you.

Christopher Novak  
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/805,718
	Filing Date	03/22/04
	First Named Inventor	Gaolong Jin
	Art Unit	2823
	Examiner Name	Trung Q. Dang
Total Number of Pages in This Submission	Attorney Docket Number	IDT-1766

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>FEE ADDRESS INDICATION FORM</b>
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	CHRISTOPHER NOVAK, REG. NO. 42,041
Signature	
Date	3-29-2006

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Typed or printed name	Laura E. Baugher
Signature	
Date	3/29/06

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